WILLOWS NURSING & REHAB CENTER

41 RICKEL RD

SUN PRAIRIE 53590 Phone: (608) 837-8529		Ownership:	Corporation
Operated from 1/1 To 12/31 Days of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/04):	57	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/04):	57	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/04:	53	Average Daily Census:	54

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (	12/31/04)	Length of Stay (12/31/04)	%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	56.6
Supp. Home Care-Personal Care	No					1 - 4 Years	26.4
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	7.5	More Than 4 Years	17.0
Day Services	No	Mental Illness (Org./Psy)	7.5	65 - 74	9.4		
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	28.3		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	49.1	********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.9	95 & Over	5.7	Full-Time Equivalent	
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Res	idents
Home Delivered Meals	No	Fractures	17.0		100.0	(12/31/04)	
Other Meals	No	Cardiovascular	17.0	65 & Over	92.5		
Transportation	No	Cerebrovascular	9.4			RNs	10.6
Referral Service	No	Diabetes	1.9	Gender	%	LPNs	17.7
Other Services	Yes	Respiratory	5.7			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	39.6	Male	30.2	Aides, & Orderlies	36.4
Mentally Ill	No			Female	69.8		
Provide Day Programming for			100.0				
Developmentally Disabled	No			İ	100.0		
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## Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other			Private Pay	<u> </u>		amily Care		1	Managed Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	응	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	1	4.8	150	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.9
Skilled Care	17	100.0	337	20	95.2	128	2	100.0	136	11	100.0	182	0	0.0	0	2	100.0	128	52	98.1
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	17	100.0		21	100.0		2	100.0		11	100.0		0	0.0		2	100.0		53	100.0

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Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12,	31/04
Deaths During Reporting Period					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	3.5	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	15.1		56.6	28.3	53
Other Nursing Homes	0.5	Dressing	15.1		60.4	24.5	53
Acute Care Hospitals	95.5	Transferring	18.9		58.5	22.6	53
Psych. HospMR/DD Facilities	0.0	Toilet Use	18.9		56.6	24.5	53
Rehabilitation Hospitals	0.0	Eating	88.7		7.5	3.8	53
Other Locations	0.5	*******	******	*****	******	*******	*****
Total Number of Admissions	199	Continence		용	Special Treatmen	ts	용
Percent Discharges To:		Indwelling Or Extern	al Catheter	7.5	Receiving Resp	iratory Care	11.3
Private Home/No Home Health	56.5	Occ/Freq. Incontiner	ıt of Bladder	54.7	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	1.0	Occ/Freq. Incontiner	it of Bowel	32.1	Receiving Suct	ioning	1.9
Other Nursing Homes	6.0	İ			Receiving Osto	my Care	1.9
Acute Care Hospitals	9.5	Mobility			Receiving Tube	Feeding	3.8
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed.	5.7	Receiving Mech	anically Altered Diets	39.6
Rehabilitation Hospitals	0.0	į -				-	
Other Locations	12.0	Skin Care			Other Resident C	haracteristics	
Deaths	15.0	With Pressure Sores		7.5	Have Advance D	irectives	84.9
Total Number of Discharges		With Rashes		0.0	Medications		
(Including Deaths)	200	İ			Receiving Psyc	hoactive Drugs	32.1

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	Pro	prietary	50	-99	Ski	lled	Al	1
	Facility	ility Peer Group		Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.7	88.5	1.07	89.0	1.06	90.5	1.05	88.8	1.07
Current Residents from In-County	86.8	80.0	1.08	81.8	1.06	82.4	1.05	77.4	1.12
Admissions from In-County, Still Residing	12.6	17.8	0.70	19.0	0.66	20.0	0.63	19.4	0.65
Admissions/Average Daily Census	368.5	184.7	1.99	161.4	2.28	156.2	2.36	146.5	2.52
Discharges/Average Daily Census	370.4	188.6	1.96	163.4	2.27	158.4	2.34	148.0	2.50
Discharges To Private Residence/Average Daily Census	213.0	86.2	2.47	78.6	2.71	72.4	2.94	66.9	3.18
Residents Receiving Skilled Care	100	95.3	1.05	95.5	1.05	94.7	1.06	89.9	1.11
Residents Aged 65 and Older	92.5	92.4	1.00	93.7	0.99	91.8	1.01	87.9	1.05
Title 19 (Medicaid) Funded Residents	39.6	62.9	0.63	60.6	0.65	62.7	0.63	66.1	0.60
Private Pay Funded Residents	20.8	20.3	1.02	26.1	0.79	23.3	0.89	20.6	1.01
Developmentally Disabled Residents	0.0	0.9	0.00	1.0	0.00	1.1	0.00	6.0	0.00
Mentally Ill Residents	7.5	31.7	0.24	34.4	0.22	37.3	0.20	33.6	0.22
General Medical Service Residents	39.6	21.2	1.87	22.5	1.76	20.4	1.94	21.1	1.88
Impaired ADL (Mean)	44.9	48.6	0.92	48.3	0.93	48.8	0.92	49.4	0.91
Psychological Problems	32.1	56.4	0.57	60.5	0.53	59.4	0.54	57.7	0.56
Nursing Care Required (Mean)	8.3	6.7	1.24	6.8	1.21	6.9	1.20	7.4	1.11